

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.
1		1		
2		1		
3	1			
4	3	1		
5	3	1		
6	1			
7	1	1		
8	1	1		
9	1	1		
10	1	1		
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47				
48				
49				
50				
TOTAL IND.	5		5	
TOTAL DEP.		5		
TOTAL CLAIMS	12	10		

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
51								
52								
53								
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100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS